



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 2898

|                             |                                       |              |                        |                                   |
|-----------------------------|---------------------------------------|--------------|------------------------|-----------------------------------|
| SERIAL NUMBER<br>10/729,606 | FILING DATE<br>12/05/2003<br><br>RULE | CLASS<br>422 | GROUP ART UNIT<br>1743 | ATTORNEY DOCKET NO.<br>10030636-1 |
|-----------------------------|---------------------------------------|--------------|------------------------|-----------------------------------|

## APPLICANTS

Allen C. Thompson, Sunnyvale, CA;

 George P. Tsai, San Jose, CA;  
 Russell Alan Parker, San Jose, CA;

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 03/12/2004

|  |          |         |        |             |
|--|----------|---------|--------|-------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no  | STATE OR | SHEETS  | TOTAL  | INDEPENDENT |
| 35 USC 119 (a-d) conditions met<br><input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | COUNTRY  | DRAWING | CLAIMS | CLAIMS      |
| Verified and Acknowledged<br>Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>  | CA       | 16      | 33     | 4           |

## ADDRESS

 022878  
 AGILENT TECHNOLOGIES, INC.  
 INTELLECTUAL PROPERTY ADMINISTRATION, LEGAL DEPT.  
 P.O. BOX 7599  
 M/S DL429  
 LOVELAND, CO  
 80537-0599

## TITLE

Devices and methods for performing array based assays

FILING FEE

RECEIVED

 FEES: Authority has been given in Paper  
 No. \_\_\_\_\_ to charge/credit DEPOSIT ACCOUNT  
 No. \_\_\_\_\_ for following:

|  |
|--|
| <input type="checkbox"/> All Fees                              |
| <input type="checkbox"/> 1.16 Fees ( Filing )                  |
| <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) |
| <input type="checkbox"/> 1.18 Fees ( Issue )                   |

|      |  |   |
|------|--|---|
| 1090 |  | <input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit _____ |
|------|--|---|